

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ronald D. McCallister, et al.

Serial No.:

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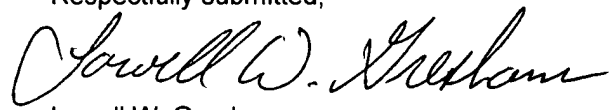
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Date

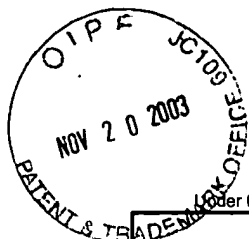
19 November 2003

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Signature

Respectfully submitted,


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PTO/SB/56 (08-03)

Approved for use through 01/31/2004. OMB 0651-0033

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)

1826-310CIPRI

Claims as Filed – Part 1

	(1) Claims in Patent	(2) Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	(A) 20	(B) 20	**** 0 =	x \$ _____ =	or	x \$ 18 =	0.00
Independent claims (37 CFR 1.16(i))	(C) 3	(D) 3	* 0 =	x \$ _____ =		x \$ 86 =	0.00
Basic Fee (37 CFR 1.16(h))				\$ _____			\$ 770.00
Total Filing Fee				\$ _____		OR	\$ 770.00

Claims as Amended – Part 2

	(1) Claims Remaining After Amendment	(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 20	MINUS ** 20	* = 0	x \$ _____ =		x \$ 18 =	0.00
Independent Claims (37 CFR 1.16(i))	*** 3	MINUS ***** 3	= 0	x \$ _____ =		x \$ 86 =	0.00
Total Additional Fee				\$ _____		OR	\$ 0.00

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ Please charge Deposit Account Number _____ in the amount of _____.
A duplicate copy of this sheet is enclosed.☐ The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or
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A duplicate copy of this sheet is enclosed.☒ A check in the amount of \$ 770.00 _____ to cover the filing/additional fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.**WARNING: Information on this form may become public. Credit card information should not
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19 November 2003

Date

31,165

Registration Number, if applicable

Signature of Applicant, Attorney or Agent of Record

Lowell W. Gresham

Typed or printed name

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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